

08-02-'07 11:50 FROM-TUNG & ASSOCIATES

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T-056 P01/02 U-715

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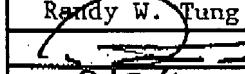
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Randy W. Tung	(Depositor's name)
	(Signature)
8/2/07	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/723,509	11/25/2003	Ping-Kun Wu	67,200-1190	8941

TITLE OF INVENTION: METHOD FOR FORMING A MULTI-LAYER SEED LAYER FOR IMPROVED CU ECP

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	08/06/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
CHAMBLISS, ALONZO	2814	438-513000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1 <u>Tung & Associates</u> 2 _____ 3 _____
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

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Taiwan Semiconductor Manufacturing Co., Ltd.

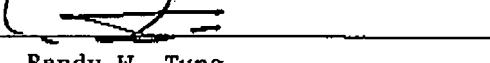
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Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted: <input checked="" type="checkbox"/> Issue Fee <input checked="" type="checkbox"/> Publication Fee (No small entity discount permitted) <input type="checkbox"/> Advance Order - # of Copies _____	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) <input type="checkbox"/> A check is enclosed. <input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).
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Authorized Signature Date 8/2/07Typed or printed name Randy W. TungRegistration No. 31,311

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